## Addendum A

Benefit Plan Design for 2005 For Represented Benefits-Eligible Employees Technical Employees Association Representing Metro Transit Employees

The parties agree to the following benefit plan design for Technical Employees Association bargaining unit members effective January 1, 2005.

- 1. Preferred Provider Medical Plans
  - a) KingCare Basic
    - Increase annual deductibles to \$500 per person and \$1,500 per family
    - Increase out of pocket maximum to \$1,200 per person and \$2,400 per family for in-network services; and \$2,000 per person and \$4,000 per family for out of network services
  - b) KingCare Preferred
    - Increase annual deductible to \$100 per person and \$300 per family
    - Increase out of pocket maximum to \$800 per person and \$1,600 per family for in-network services; and \$1,600 per person and \$3,200 per family for out of network services
  - c) Both KingCare Basic and Preferred
    - Carve out prescription drug coverage and implement a stand-alone pharmacy benefit management program
      - Retail prescriptions
        - \$10 copay for generic drugs
        - \$20 copay for preferred brand name drugs (\$15 if no generic equivalent is available or the patient cannot take generic version for medical reasons)
        - \$30 copay for non-preferred brand name drugs (\$25 if no generic/preferred brand equivalent is available or the patient cannot take the generic/preferred brand for medical reasons)
      - Mail order prescriptions 90 day supply
        - \$20 copay for generic drugs
        - \$40 copay for preferred brand name drugs (\$30 if no generic equivalent is available or the patient cannot take generic version for medical reasons)
        - \$60 copay for non-preferred brand name drugs (\$50 if no generic/preferred brand equivalent is available or the patient cannot take generic/preferred brand for medical reasons)
        - If cost of the prescription is less than the copay, only the cost of the actual prescription will be changed.
- 2. Eliminate IPA HMO option
- 3. Staff Model HMO
  - a) Change from Virginia Mason/Group Health Alliant Plan to Group Health Cooperative
    - Increase copay for office visit to \$20
    - Increase copay for inpatient hospital to \$200
    - Increase copay for retail and mail order prescription drugs to the same level as outlined for the KingCare plans
- 4. Change in coverage rules so that an employee can only be covered as an employee and cannot also be covered as a dependent (spouse/domestic partner) of another King County employee
- 5. Change in the method of calculating coordination of benefits between KingCare and other medical coverage—When KingCare is secondary payer, it will pay only the difference between what the primary plan paid and what KingCare would have paid if it was primary. If the primary plan has already paid more than KingCare would pay, there is no additional payment.

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